

Employee Notice for Reemployment Tax* Coverage (Employer's Reciprocal Coverage Election)

RTS-6B
R. 01/13
TC
Rule 738-10.037
Florida Administrative Code
Effective Date 11/14



	Social Security No.:
Effective as of	
This will be true under an election duly filed by the undersigned employer and approved by the state of Florida, Department of Revenue, to which the other jurisdictions listed above duly consented.	
If you become unemployed, you can file your reemployment assistance claim from any location in the state or nation through the internet at http://www.floridajobs.org/job-seekers-community-services. If you have questions or need additional information concerning filing a claim for reemployment assistance benefits, you may call 1-800-204-2418.	
Save this notice in case it is needed, if and when you file a claim for benefits.	
Firm-Name of Employer:	
Employer's Florida Reemployment Tax Account No.:	
Date this notice is given or mailed to the employee: MM/DD/YYYY	
The employer must complete at least two copies of this notice, and distribute them as follows:	
One copy must be delivered (or mailed) to the employee.	
	lorida Department of Revenue O Box 6510 allahassee FL 32314-6510
I understand and agree to the above statements.	
(Signature of Employee)	

*Formerly Unemployment Tax

Social security numbers (SSNs) are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. SSNs obtained for tax administration purposes are confidential under sections 213,053 and 119,071, Florida Statutes, and not subject to disclosure as public records. Collection of your SSN is authorized under state and federal law. Visit our internet site at **www.floridarevenue.com** and select "Privacy Notice" for more information regarding the state and federal law governing the collection, use, or release of SSNs, including authorized exceptions.

www.floridarevenue.com